

BQC - 91 – 014

Date: March 18, 1991

To: Facilities for the Developmentally Disabled

FDD 3

From: Larry Tainter, Director  
Bureau of Quality Assurance

Subject: NAT (No Active Treatment) Designation

This memo is written to explain how the Bureau of Quality Compliance has implemented Regional Program Letter No. 90-18 (attached).

As you are aware the primary responsibility of Intermediate Care Facilities for the Mentally Retarded is to provide active treatment services to developmentally disabled individuals. Active treatment is defined in federal regulations as follows:

“42 CFR 483.440 Condition of Participation: Active Treatment Services

(a)(1) Each client must receive a continuous active treatment program, which includes aggressive, consistent implementation of a program of specialized and generic training, treatment, health services and related services described in this subpart, that is directed toward –

- (i) The acquisition of the behaviors necessary for the client to function with as much self-determination and independence as possible; and
  - (ii) The prevention or deceleration or regression or loss of current optimal functional status.
- (2) Active treatment does not include services to maintain generally independent clients who are able to function with little supervision or in the absence of a continuous active treatment program.”

While the ICF/MR regulations that went into effect 10/3/88 prohibit the admission of individuals who do not need active treatment services, there are individuals who were admitted prior to that date who may not need active treatment; plus there may be individuals admitted either prior to or after that date who have progressed because the services they have received determined that a resident does not need active treatment. If it is determined that a resident does not need active treatment, medical assistance will not pay for care in an Intermediate Care Facility for the Mentally Retarded.

The purpose of the annual Inspection of Care review is to determine the adequacy, appropriateness, and quality of the services including active treatment services, provided to each Medical Assistance recipient. As part of this review, a care level is set for purposes of medical assistance reimbursement.

When the Bureau identifies individuals residing in an ICF/MR who are not in need of active treatment, and therefore inappropriately placed in an ICF/MR their level of care will be changed to include a NAT (No Active Treatment) designation. The No Active Treatment designation indicates that active treatment is not required for an individual who is able to function with little supervision or in the absence of a continuous active treatment program and therefore no longer needs the services of an ICF/MR.

At the conclusion of the Inspection of Care review, these residents or their guardians will receive a letter indicating the change in care level to include NAT designation, the reduction in Medical Assistance coverage, and the effective date of the action and appeal information.

If you have any questions, please contact the appropriate Field Operations Manager.

LT/CR/jh                      6279

Attachment

cc:        -Board on Aging and LTC  
            -Wis. Assoc. of Homes and Services for the Aging  
            -Wis. Association of Nursing Homes  
            -Wis. Counties Association  
            -Wis. Medical Records Assoc. Cons. Comm.  
            -Service Employees International Union  
            -Wis. Coalition for Advocacy  
            -Comm. on Aging, Extended Care Fac./HHC  
            -Wis. Assoc. of Medical Directors  
            -George F. MacKenzie  
            -Kevin Piper, Dir., BHCF  
            -Jerry Born, DCTF  
            -Jerry Sandlin, HCFA, Chicago